

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number 10/534,200-Conf. #5266	
	Filing Date November 7, 2002	
	First Named Inventor Palaniappan Meiyappan	
	Title METHOD AND APPARATUS FOR ADAPTIVE CARRIER ALLOCATION AND	
	Art Unit 2617	
	Examiner Name Trost IV, William George	
Attorney Docket No. 68144/P020US.B/10505125		

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 000029053

OR

☐ Practitioner(s) named below:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	Date
Name	Telephone
Title and Company	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 1 forms are submitted.